0.A

1,300,665.*

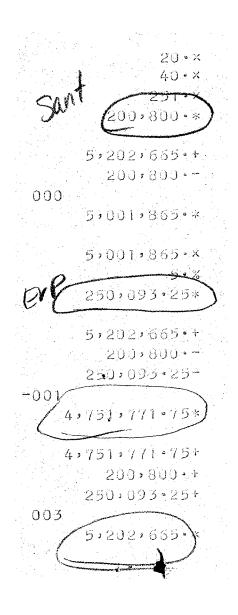
1,411,300.*

1,195,000.*

1,297,700.*

004

5,202,665.*



0.*
,200,800.*
4,751,772.*
250,093.*
003
5,202,665.*

SECTION B

WATER DATA

10. Water Source: (Circle all appropriate answ	ærs)	
--	------	--

Purchased

Y)- N

Well

Y N

If Y, is it metered

Y- N

River

Y -(N)

If Y, is it metered

Y - N

11. Name of purchased water supplier: Borough of Elmwood PAIK NJ

List all Account #'s: 1016290

12. Water Received: From Mo. Ol Yr. 2005 Through Mo. / Yr. _____.

(* Next to a figure means it is estimated).

٦ [PURCHASED	WELL	RIVER	TOTAL
r	. 1 st Qtr.	*1,300,665	0	0	1,300,665
	2 nd Qtr.	1,411, 300	0	0	1,411,300
	3 rd Qtr.	1,193,000	0	0	1, 19 3, 006
	4 th Qtr.	1,297,700	0	0	1,297,700

GRAND TOTAL 5,202,665

Report in gallons

13. Water Use and Disposition (*Next to a figure means it is estimated).

same as above	Gallons	Discharged	Gallons Used		
less 5% evaporation	Sanitary/Combined	Stormwater/River/	Other		
evaporation	Sewer	Ditch			
Sanitary service only	200200				
Process waste waster	200,800				
Cooling water					
Evaporation			250,093.25		
Contained in the product					
Other (describe)					

GRAND TOTAL 5, 202, 665



PASSAIC VALLEY SEWERAGE COMMISSIONERS APPLICATION FOR A SEWER USE PERMIT

	SECTION A
1.	Company Name: Empire Overall Dry Cleaners, Inc.
	Permit Number if applicable:
3.	Location: 18 Stefanic Ave
	Elmwood Park NJ 07407 Zip Code: 07407
4.	Mailing Address: Same as above
	Zip Code:
5.	Person to contact concerning information provided in this application:
	Name of Contact Official: <u>Deborah</u> Craffen
	Title: Vice President Phone No.: 201-796-11
	Address: 18 Stefanic Ave ElmwoodPK Zip code: 07407
6.	Number of Employees – Full Time: 40 Part Time: 0
	Number of Work Days Per Year: 251
	Number of Shifts Per Day:
7.	If property is owned indicate block and lot number(s):
	Assessed Value: 1, 424, 100 00
8.	If property is rented indicate name and address of owner: Joseph R. Mayer
	43 Ray Street, Elmwood Park NJ 07407
	Total square feet rented: $\frac{\partial Q_1000}{\partial Q_1000}$
9.	List NJPDES Permit Number if applicable, None and
	Name of receiving Body of Water entered

SECTION B (continued)

14.	Process wast	ewater which is discharged as a	bove is metered	l as follows:
			y (N)	
	_		Y - 🕏	
	To the Sto	orm Sewer	Y - 🔂	
	To the Separate Sanitary Sewer To the Combined Sewer River or Ditch Waste hauler information: List all firm process waste or sludge from this facility ontractor Address SECTIONAL CHARACTERISTICS Discharge of Industrial Waste is conting or intermittent Brief description of Manufacturing or Uniforms and mats List SIC CODE #: 7218 Principal Raw Materials used:		Y -(N)	
15.	Waste hauler	r information: List all firms and	l/or independen	t contractors used to remove
	process wast	e or sludge from this facility.		
Cont	tractor	Address	Icc#	Waste type handled
Rose	ey's Tank CLEANING	Coles Hill, BLackwood NJ		Processed waste / sludge
`				
OPI 16.	Discharge of or intermitted of intermitted of the discharge of the dischar	f Industrial Waste is continuous ent 8 Hours arge is intermittent, it occurs bet ption of Manufacturing or other ms and mats.	each operating ween the follow	ving hours: 6:00 am - 2:00 p
18.		_	ergent	
19.	Principal Princi	roducts or Services: 100% 1 Cloth mats with	cotlon a rubber ba	nd 65/35 Blend acking.

20.	Describe se	sonal variations, if significant, giving dates, volumes, rates, hours, etc.	•
		ntions in product lines which affect waste characteristics:	
		cility shutdown for vacation(s)? NO If so, is it basically the same ti	me
	each year.	Provide dates usually shutdown	
		SECTION D	
<u>M(</u>	<u>ONITORING</u>		
21.	Describe ar	pretreatment process or effluent monitoring system in use:	
	Outlet	1 PH MONITOR - PH adjustment in effect	<u>t</u>
		· ·	
	Outlet	Oil and grease seperator in effect	-
	Outlet		_
22.	Sampling i	formation:	
		Contains Industrial	
	Outlet	Waste Sampler Type Refrigerated	

1500 Power pack

yes

Yes

SECTION D (continued)

23. Volume Information:

<u>Outlet</u>	Daily Flow (Gallons)	Metered $(Y - N)$	Type	<u>Date</u>	
ı	20,728	Y			
24.	Frequency of calibration of each fl	ow meter:	NIA		
∠⊣.	riequency of canonation of each in	O 11 11100011 —		is Ny faritr'i Name	
				- X	

- 25. Attach plot plan of the property showing:
 - (a) all existing or proposed sewer and drain lines (including outlets to a storm sewer, river or ditch);
 - (b) sample point(s); Monitoring or Pretreatment Equipment; Incoming meter(s); Well meter(s); Internal meter (s); Flowmeter(s).
 - (c) details of the connection(s) to the municipal (or PVSC) sewer, including the distance and direction of each connection from the nearest street intersection.

SECTION E

ANALYSIS OF INDUSTRIAL WASTE

OUTLET NO.

26. Analysis for Industrial Waste must be a proper sample taken for each outlet.

Repo	rt to the nearest unit: XX.		Report	to the nearest hundredt	h: 0.XX
	pt where indicated with (1) Ex	Except where indicated Example: 0.36			
mg/l		T	mg/l		,
Code	<u>Parameter</u>	Value	Code	<u>Parameter</u>	<u>Value</u>
0200*	Radioactivity (PL-1)		1097*	Antimony (Sb)	
0500	Total Solids	850	1002*	Arsenic (As)	
0505	Volatile Solids	160	1022*	Boron (B)	
0530	Total Suspended Solids	18.9	1027	Cadmium (Cd)	,002
0540	Volatile Suspended Solids	1)	1034*	Chromium Total (Cr)	
0555	(1)(3) Petroleum Hydrocarbons	8,4	1042	Copper (Cu)	0.04
0310	Biochemical Oxygen Demand		1045*	Iron (Fe)	
	(BOD)	132	1051	Lead (Pb)	0.03
0340	Chemical Oxygen Demand (COD)	199	0720*(3)	Cyanide (Cn)	
		199	1900	Mercury (Report to 0.XXX)	0.0005
0680	Total Organic Carbon (TOC)	7/.	1067	Nickel (Ni)	0.038
		36	1147*	Selenium (Se)	
9000	pH(standard unit range)	0.06	1077*	Silver (Ag)	
0610	(1) Ammonia as N	0.2	1102*	Tin (Sn)	
0550	(1)(3) Total Oil & Grease	16.7	1092	Zinc (Zn)	0.29
0745*	(1) Sulfide		2730	Phenol	0 06

FOOTNOTES:

(1) Report results to the nearest tenth, i.e., 1.6 mg/l.
 (*) Analyze for this if reasonably expected to be present in the discharge unless otherwise exempted.

4053*

9999*(3)

Pesticides (Report to 0.XXX)

TTVO (Report to 0.XXX)

- (2) See instructions.
- (3) Grab sample required

(1) Ortho Phosphates as P

(2)(3) TTO (Report to 0.XXX)

(1) Kjeldahl N as N

Rev: 1/87 8/89 7/90 9/94 8/95 11/95 07/98

0507*

0625*

9998*

SECTION E (continued)

Samp	oles collected by: Ed Zahn, Plant Manager
	Date: Monthly
Samp	ole analyzed by: APL (Aqua Pro-Tech Laboratories Date: 6/2/05
	ucts being manufactured when sample was collected: <u>Laundering</u> of uniforms
27.	Who performs the analyses of the samples for User Charge? A PL (Agua Pro-Tech Laboratories)
28.	Is the Laboratory certified by NJDEP to conduct all the analyses Y N
29.	Who performs the analyses of the samples for the Pretreatment Parameters? APL (Agua Pro-Tech Laboratwies)
	If monitoring has not commenced for Pretreatment, indicate Laboratory you plan to use. If unknown, so state:
30.	Is the Laboratory certified by NJDEP to conduct all the required Pretreatment analyses? (Y) N
31.	Based upon knowledge of materials and processes used at this facility check the appropriate box that best describes the potential that a Priority Pollutant, listed on Tables 1.2 & 3 is present in your discharge.

SECTION F

PRETREATMENT

	Industrial Category: 7218
	Subpart (s):
	Compliance date(s): Current
	Is facility in compliance? $\frac{\sqrt{\varepsilon} S}{\sqrt{\varepsilon}}$ If not, and if compliance date has passed, explanations being taken to get into compliance:
	Date Baseline Monitoring Report (BMR) submitted to PVSC: 07/1995
	Compliance schedule submitted: Yes
	If yes is facility on schedule? Yes Explain if compliance date will not be met:
	Does this facility come under the Resource Conservation and Recovery Act (RCRA)? If yes, describe Does this facility have a Spill Prevention Control and Countermeasures (SPCC) plan? If yes, describe NO
•	
	Has NJDEP or EPA ever cited this facility for a violation of State or Federal
	Regulations for the nature of its wastewater discharge?(Y) N
	Is this facility under an ISRA Clean up? NO If so, has a plan been approved by NJDEP:
]	Is there any plan to discharge groundwater?

CERTIFICATION*:

The information contained in this application is familiar to me and, to the best of my knowledge and belief, such information is true, complete and accurate.

If the applicant is a corporation, a corporate resolution is attached granting me the authority to sign the application on behalf of the corporation.

Name of signing	g official:	Deborah A. Craffen
		Print Name
	General	Manager
TITLE: ——	Otty	
2/10/06	·	_ Mod roppin
DATE		SIGNATURE

*APPLICATION MUST BE SIGNED BY ONE OF THE FOLLOWING:

- a. Principal Officer of Corporation
- b. President or Owner of Company
- c. General Partner if a Partnership
- d. Plant Manager or Authorized Representative

TABLE 1 EPA PRIORITY POLLUTANTS

NAME	A	В	C	D		A	В	C	D
Acenaphthene	+		\times		2,4 dimethylphenol				
acrolein			X	-	2,4 dinitrotoluene				****
acrylonitrile					2,6 dinitrotoluene		-		
benzene			×		1,2 diphenylhydrazine				*
benzidine					ethylbenzene				
carbon tetrachloride				***	fluoranthene		,		
(tetrachloromethane)			$ \mathcal{N} $		4-chlorophenyl phenyl ether				
chlorobenzene					4-bromophenyl phenyl ether			$\langle \cdot \rangle$	
1,2,4-trichchlorobenzene					bis(2-chlorosispropyl) ether				
hexachlorobenzene					bis(2-chloroethoxy) methane				,
1,2 dichloroethane					methylene				
1,1,1 trichlorethane					chloride(dichloromethane)			X	
hexachloroethane			X		methyl chloride				
1,1,dichloroethane			X	· · · · · · · · · · · · · · · · · · ·	(chloromethane)			X	
1,1,2 trichloroethane					methyl bromide				
1,1,2,2 tetrachloroethane					(bromomethane)			X	
chlorethane			X		bromoform(tribomomethane)				
bis(chloromethyl) ether			X		dichlorobromomethane		i		
Bis(2 chloroethyl) ether			X		trichlorofluoromethane				·····
2-chloroethyl vinyl ether mixed			X		dichclorodifuoromethane			X	
2-chloronaphthalene			\mathbf{X}		chlorodibromomethane				
2,4,6, trichlorophenol					hexachlorobutadiene				
parachlorometa cresol			\times		hexachlorocyclopentadiene			\supset	
Chloroform (trichloromethane)			X		isophorone			X	
2 chlorophenol			\times		naphthalene	-			
1,2, dichlorobenzene			X		nitrobenzene			\sim	
1,3, dichlorobenzene			X		2-nitrophenol			\searrow	
1,4, dichlorobenzene			X		4-nitrophenol			\searrow	
3.3. dichlorobenzidine			\geq		2.4-dinitrophenol				
1,1,dichloroethylene	1		\geq		4,6 dinitro-o cresol			\nearrow	
1,2 trans-dichloroethylene	1		\bowtie		N-nitrosodimethylamine			\geq	
2,4,dichlorophenol			$\searrow 1$		N-nitrosodiphenlamine			X	
1,2, dichloropropane			\times		N-nitrosodi-n-proplyamine			\geq	
1,3, dichloropropylene			\geq		pentachlorophenol			X	
(1,3 dichclor propene)			\geq		phenol				

- A. KNOWN TO BE PRESENT
- B. SUSPECTED TO BE PRESENT
- C. KNOWN TO BE ABSENT
- D. SUSPECT TO BE ABSENT

TABLE 1 EPA PRIORITY POLLUTANTS (continued)

NAME	A	В	C	D		A	В	C	D
bis(2-ethylhexyl) phthalate		-	X		endrin			\times	
butylbenzylphthalate			X		endrin aldahyde			$\geq \leq$	
di-n-butylphthalate			X		heptachlor			\geq	
di-n-octylphthalate			X		heptachlor (epoxide)			\times	
diethylphthalate	_		X		BHC Alpha			\searrow	
dimethylphthalate					BHC Beta	-		\times	
benzo(a)anthracene			\times		BHC Gamma	•		\geq	L.,
benzo(a)pyrene			$\stackrel{\sim}{\sim}$		BHC Delta				
3,4 benzofluoranthene					PCB1242				
benzo(k) fluoranthane		1	\triangleright		PCB1254			\times	
chrysene			X	l	PCB1221			X	
acenaphthylene	-				PCB1232			\times	
anthracene		 			PCB1248				
benzo(ghi)perylene		1	1		PCB1260			\times	
fluorene		1	K	<u> </u>	PCB1016			\mathbf{X}	
phenanthrene			X,		toxaphene			>	
dibenzo (a,h) anthracene			X		antimony(total)			\searrow	
indeno (1,2,3-c,d) pyrene			X		arsenic (total			\leq	
pyrene			X		asbestos (fibrous)			>	
tetrachloroethylene					beryllium (total)			\geq	
toluene		·	\searrow		cadmium (total)			\searrow	
trichloroethylene		1			chromium (total)			\geq	
vinyl chloride			ľ×		copper (total)	-		\searrow	
aldrin			\searrow		cvanide (total)			>>	<u> </u>
dieldrin			\geq	1	lead (total)			$\downarrow X$	
chlordane			\times		mercury (total)			$\downarrow \times$	
4,4 DDT			\times		nickel (total)		-	$\downarrow >$	<u> </u>
4,4, DDE			\nearrow		selenium (total)			\nearrow	-
4,4, DDD			\geq	1	silver (total)		ļ.	$\downarrow \!$	
endosulfan 1			\nearrow		thallium (total)		.	$\downarrow >$	<u> </u>
endosulfan 11			\nearrow		zinc (total)			\sim	<u></u>
endosulfan sulfate			$\perp \times$		2,3,7,8, tetrachlorodibenzo		-	\nearrow	-
			\sim	1	p-dioxin				<u> </u>

- A. KNOWN TO BE PRESENT
- B. SUSPECTED TO BE PRESENT
- C. KNOWN TO BE ABSENT
- D. SUSPECT TO BE ABSENT

TABLE 2 NJDEP EXPANDED PRIORITY POLLUTANTS

NAME	$ \mathbf{A} $	В	C	D		A	В	$ \mathbf{C} $	D
acrylamide			\triangleright		n,n-dimethyl aniline			\geq	
amitrole					3,3-dimethyl benzidine			$\geq \leq$	
amyl alcohols			\angle		1,1-dimethylhydrazine			\times	
anilne hydrochloride			\times		dioxane				
anisole			\times		diphynylamine				
auramine			>>		ethylenimine			\leq	
benzotrichloride			\times		hydrazine				
benzylamine			>>		4,4-methylene bis				
			>		(2-chloraniline)				
o-chloroaniline			X		4,4-methylenedianiline				
m-chloroaniline			X		methyl isobutyl ketone				
p-chloraniline			X		alpha-naphthylamine				•
1-chloro-2-nitrobenzene			X		beta-naphthylamine				
1-chloro-4-nitrobenzene			X		n-methylaniline			$\langle \rangle$	
chloroprene					1,2- phenylenediamine			$\langle \rangle$	
chrysoidine					1,3- phenylenediamine				
cumene			\Diamond		1,4-phenylenediamine			>	
2,3-dichloroaniline			\leq		sudan 1 (solvent yellow 14)	<u> </u>			
2,4-dichloroaniline			\times		thiourea				
2,5-dichloroaniline			X		toluene sulfonic acids	 			
3,4-dichloroaniline					toluidines			$\langle \rangle$	
3,5-dichloroaniline			$ \nearrow $		xylidines				
1,3-dichloropropene			\bowtie			+		$\langle \times \rangle$	
1.3-dimethoxybenzidine			\times						

- A. KNOWN TO BE PRESENT
- B. SUSPECTED TO BE PRESENT
- C. KNOWN TO BE ABSENT
- D. SUSPECT TO BE ABSENT

TABLE 3 EPA HAZARDOUS SUBSTANCES

NAME	A	В	C	D		A	В	C	D
acetaldehyde		<u> </u>	X		isopropanolamine			X	
allyl alcohol			X		kelthane			\supset	· · · · · · · · · · · · · · · · · · ·
allyl chloride			X		kepone			X	
amyl acetate			X		malathion			\geq	<u> </u>
aniline			X		mercaptodimethur	•	<u> </u>	\geq	
benzonitrile			X		methoxychlor			\angle	
benzyl chloride			X		methyl mercaptan			\geq	
butyl acetate					methyl methacrylate		ļ	X	
butylamine			X		methly parathion			\geq	
captan			X		mevinphos				ļ
carbaryl			K		mexacarbate			$\langle \rangle$	<u> </u>
carbofuran			5		monoethylamine			\searrow	
carbon disulfide			X		monomethylamine			\geq	
chlorpyrifos			K		naled			\boxtimes	
coumaphos			\sim		napthenic acid		_	\searrow	<u> </u>
cresol			X		nitrotoluene			\angle	
crotonaldehyde			X		parathion			\angle	
cyclohexane			X		phenolsulfanate			\geq	>
2,4-D (2,4-dichlorophenoxy)			\boxtimes		phosgene			\geq	
acetic acid			X		propagrite			X	
diazinon			X		propylene oxide			X	
dicamba			X		pyrethrins			\times	
dichlobenil			\times		quinoline			X	-
dichlone			X		resorcinol			$\downarrow X$	
2,2-dichloropropionic acid			\geq		strontium			$\perp \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \!$,—
dichlorvos			\times		strychnine				<u>-</u>
diethylamine			\geq		stryrene		-	+	}
dimethylamine			\times		2,4,5-T (2,4,5-trichloro-			X	
			\downarrow	_	phenoxy acetic acid)				}
dinitrobenzene			_ ~	\longrightarrow	TDE (tetrachloro-			X	
				_	diphenylethane)			$\left\langle \cdot \right\rangle$	\
diquat		-		-	2,4,5-TP 2(2,4,5-			X	
1: 10			+	_	trichlorophenoxy trichlorofon		 	1	\
disulfoton			+	}	triethylamine	_	_	$\forall \vec{x}$	
diuron		- 	+	+	trimethylamine			1	
epichlorohydrin		_	+	+	propanoic acid			*	1

- A. KNOWN TO BE PRESENT
- B. SUSPECTED TO BE PRESENT
- C. KNOWN TO BE ABSENT
- D. SUSPECT TO BE ABSENT

TABLE 3 EPA HAZARDOUS SUBSTANCES (continued)

NAME	<u>A</u>	<u>B</u>	<u>C</u>	<u>D</u>		<u>A</u>	<u>B</u>	<u>C</u>	D
ethanolamine		·	X		uranium		•		
ethion			\times		vanadium			$\langle \rangle$	
ethylene diamine			X		vinyl acetate			>	
ethylene dibromide			\times		xylene			$\langle \rangle$	
formaldehyde		-	X		xylenol		•	\Rightarrow	
furfural			X		zirconium	-		\leq	-
guthion			X						
isoprene			$\boldsymbol{\times}$						

- A. KNOWN TO BE PRESENT
- B. SUSPECTED TO BE PRESENT
- C. KNOWN TO BE ABSENT
- D. SUSPECT TO BE ABSENT

SUPPLEMENTAL SEWER USE APPLICATION QUESTIONNAIRE

The following questionnaire must be completed and submitted by all industrial and tax-exempt users making application for a SEWER USE PERMIT. The purpose of this questionnaire is to identify the correct name and address of the applicant and all individuals and entities owning 10% or more of the applicant. This will assist the PVSC by providing necessary information for service of notices, bills and other documents upon the applicant, for service of process as well as the individual to be contacted in the event of an emergency.

ACKNOWLEDGING ITS APPLICANT IS SIGNING THIS APPLICATION THE BYCONTAINED INFORMATION OBLIGATION TO UPDATE THE CONTINUING QUESTIONNAIRE. SPECIFICALLY THE APPLICANT UNDERSTANDS THAT IT SHALL NOTIFY THE PVSC WITHIN THIRTY (30) DAYS OF ITS ENTERING INTO A CONTRACT OR AGREEMENT TO TRANSFER ITS CAPITAL STOCK AND/OR 50% OR MORE OF ITS ASSETS. THE APPLICANT SHALL LIKEWISE INFORM THE PVSC, ON A CONTINUING BASIS, OF ALL INDIVIDUALS OR ENTITIES OWNING 10% OR MORE OF THE CAPITAL STOCK OR ASSETS OF THE CORPORATION AND ANY INDIVIDUAL OR ENTITY ENTITLED TO RECEIVE MORE THAN 10% OF THE NET PROFITS OF THE APPLICANT.

FAILURE TO NOTIFY THE PVSC OF ANY CHANGES IN THE CORPORATE STRUCTURE, OWNERSHIP OR PLANNED-TRANSFER OF OWNERSHIP WITHIN 15 DAYS OF ITS OCCURRENCE SHALL BE DEEMED A VIOLATION OF THE SEWER USE PERMIT, THE RULES AND REGULATIONS OF THE PVSC AND N.J.S.A. 58:14-1 et. seq.

SECTION ONE

(To be completed by all applicants)

NAME OF APPLICANT: State the complete name of the organization applying for a SEWER USE PERMIT ("Permit"), as it appears on the certificate of incorporation, charter, by-laws, partnership agreement, trust or other official document which establishes the name of the applicant (if no such document exists, state the name the business uses):

Empire Overall Dry Cleaners, Inc.
Name of Applicant

TRADE NAME: Identify all trade names, names under which the applicant will be doing or soliciting business and/or fictitious names that the organization will utilize at the location(s) for which this Permit application is made.

Empire Overall Dry Cleaners, Inc.
Trade Name/Fictitious Name

BUSINESS ORGANIZATION:	Please check	the appr	opriate box:		
[] Sole Proprietorship [] Partnership [] Limited Partnership [] Corporation [] Other (describe)		[] [] []	Trust Joint Venture Non-Profit Co Limited Liabi		
EMERGENCY CONTACT PER telephone number of the person(s) t		event of ontact:	an emergency	, provide the name,	address and
Name: Ed 2ahn					
Street Address: 254 Madis	on Ave				
City, State & Zip Code: Masbroo	uck Heights	ひてい	7604		
Business Telephone: 201.796 PAST NAMES OF APPLICANT.	cell	phone:	# 201-694.	- 2122	
out to the public as doing business i as," fictitious, or informal name.	n the past. Incl	ude nam	es of division,	and "trading as," "o	loing business
<u>Name</u>	NIA	From (Year)	To (Year)	
	- -		•		
APPLICANT'S FORMER FACII State of New Jersey at which the appropriate which such a business was owned or director, officer, key employee or standard to the control of the	plicant formerly r operated by an	operated v predec	d any aspect of the appertudent of the appertudent of the appertudent and appears of the appertudent and appears of the appear	f its business, and a	ny location at owner, partner,
41			-		

	erating any aspect				
	N/A	Type of	USEPA I.D. any permits (
Address	Telephone	facility_	name of issu		
		SECTION T	wo		
(To b	e completed only b	y Corporations an	d Limited Liability	Companies)	•
REGISTERED AGEN	T: Identify the nar	ne and address of	the Corporation's R	Registered Agen	t:
Name: Jo	seph R M	oyer			
Name: Jo Company Name: Er	npire Over	all Dry CL	eaners, Inc.		
Street Address: 18	Stefanic	Ave			
		^	J 07407		
City, State & Zip Code:	C /// 100000	•			•
City, State & Zip Code: Telephone: 20					
City, State & Zip Code: Telephone: 20					
Telephone: 20	1 - 796 - Area Code) OF INCORPORA	TION/FORMAT	TON: Identify the	state where the	
	1 - 796 - Area Code) OF INCORPORA	TION/FORMAT	TON: Identify the tertificate of Incorp	state where the oration/Formation	on was filed:
DATE AND PLACE (corporation/LLC was or	Area Code) OF INCORPORA rganized and the definition of the desired and the definition of the definiti	TION/FORMAT	TON: Identify the ertificate of Incorporate	state where the oration/Formation	on was filed:
Telephone: 20 Comporation/LLC was of State/Country:	1 - 796 - Area Code) OF INCORPORA	TION/FORMAT	TON: Identify the dertificate of Incorport	state where the oration/Formation	on was filed:
Telephone: 20 DATE AND PLACE (corporation/LLC was of State/Country:	1 - 796 - Area Code) OF INCORPORA rganized and the di Jew Jersey 164	TION/FORMAT ate on which the C	TION: Identify the Certificate of Incorporate	state where the oration/Formation	on was filed:
Telephone: 20 (A DATE AND PLACE (corporation/LLC was of State/Country: Date: (A)	Area Code) OF INCORPORA rganized and the di Jew Jersey 164 ation No.:	TION/FORMAT ate on which the C	TON: Identify the dertificate of Incorporate YesNo	state where the oration/Formation	on was filed:
DATE AND PLACE Corporation/LLC was of State/Country: Date: Certificate of Incorporation	Area Code) OF INCORPORA rganized and the description No.: incorporation attace O IN NEW JERS	TION/FORMAT ate on which the C hed? EY: If other than	YesNo a New Jersey corpo	oration/Formation	te the date on

OFFICERS. Lis this section as neces	t the following information as essary.	to each Officer of the corpo	oration. Use additional copies of
Name: Joseph	n R Moyer	Telephone: <u></u> <i>。</i>	1-796-1106
Business address:	18 Stefanic Ave	EIMWOODPK 6	7407
Office held	Date took office	Date of birth	
President		11/28/40	
Name: <u>Debola</u>	ah A Craften	Telephone: 30 (ar)1 796 -1106 rea code)
Business address:	18 Stetanic Ave	Elmwood Park N	J07407
Office held_	Date took office	Date of birth	
Vice Presiden	<u>t</u> 1/1/2004	12/16/62	
DIRECTORS. List of this section as ne	t the following information as ecessary.	to each Director of the corp	oration. Use additional copies
Name:		Telephone:(ar	ea code)
Business address:		,	
Office neld	Date took office	Date of birth	

Officer or Direc	tor of the corpora	IRECTORS: List the ation at any time during f this section, as necess	the last 10 year			n
Name and last	known address:					
Position held	From	To (month/year)	Date of birth			
· 						
		SECTION	THREE	V 1		
	(To be comple	eted only by Corporation	ns and Limited	Liability Companie	es)	
List all persons Applicant along	and/or entities he g with the address	olding a 10% or greater ses and telephone #. Us	ownership, equ e additional co	nity, beneficial or opies of this section	ther interest in the n as necessary.	
Name: Jo	seph R. M	ager				
Street Address:	43 Ray	Street				
City, State & Zi	ip Code: Elm	sood park NJ o	740 7 Bus.Phone	201-796	-1106	
Name:	•					
Street Address:						
			ומ מ			
City, State & Z	ip Code:		Bus.Phone			
If any of the posuch corporation	ersons and/or en on provide all info	tities listed above is a comation requested in So	corporation or ection Two of t	Limited Liability (his Questionnaire.	Corporation, for e	ach
		SECTIO	N FOUR			
	(To b	pe completed only by Pa	rtnerships or Jo	oint Ventures)	IIA)	
Provide a copy	of the partnershi	ip or joint venture agreen	ment of applica	nt.		
Convertached) V	es No				

TYPE OF ASSOCIATION:	Check One
[] General Partnership	[] Limited Partnership [] Joint Venture
GENERAL PARTNERS OR JOIN or joint venturer. Use additional of partners separately under the heading	copies of this section, as necessary. If a limited partnership, list limited
Name:	(N A)
Street Address:	
City, State & Zip Code:	
Telephone:	
Name:	
Street Address:	
City, State & Zip Code:	
Telephone:	
LIMITED PARTNERS. List this section as necessary.	the following information as to each limited. Use additional copies of
Name:	NA
Street Address:	
City, State & Zip Code:	Telephone:
Name:	
Street Address:	
City, State & Zip Code:	Telephone:

(general and limited) and joint venturers of the	applicant during the past 10	years that are not listed above.
Use additional copies of this section as necessa	ary.	
Name:		
Street Address:		
City, State & Zip Code:	Telephone:	
Dates during which individual was a partner:		· · · · · · · · · · · · · · · · · · ·
Name:		
Street Address:		
City, State & Zip Code:		
Telephone:	Telephone	
Dates during which individual was a partner:		
Dates during which individual was a paraist.		
If any of the persons and/or entities listed above such corporation provide all information request	is a corporation or Limited Lited in Section Two of this Que	ability Corporation, for each estionnaire.
	•	
S	ECTION FIVE	•
(This section to be completed on other than a sole proprietorship, as a trust or association)	ly if the business concern is or corporation, partnership or jo	rganized in a form int venture—such
FORM OF BUSINESS ORGANIZATION: legal authority it was established.	Describe how the business er	ntity is organized and under what
	(N/A.)	
Type (trust, trade association; estate; etc.)		
Copy attached? Yes No)	

OWNERS, OFFICERS, TRUSTEES, CONTROLLING PARTIES, ETC. List the following information as to each person who owns, controls or is an officer or trustee of the Applicant. If any owner, officer, trustee, or controlling party listed below shall be a corporation, limited liability corporation, or partnership (general or limited liability), the Applicant shall supply the information requested in Sections Two, Three and Four as applicable. Use additional copies of this section as necessary.

name	N	ame	:
------	---	-----	---

Street Address:

City, State & Zip Code:

Telephone:

Name:

Street Address:

City, State & Zip Code:

Telephone:

SECTION SIX

CIVIL VIOLATIONS HISTORY

(To be completed by all applicants)

The following questions concern civil violations of environmental protection laws and regulations. In this section, the term "you" refers to the applicant identified in SECTION I, and to any of the following:

- a. Any predecessor firm, or any previous name under which the applicant operated.
- b. Subsidiaries: Any business in which the applicant holds 25% of equity or debt liability.
- c. Sister companies: Any business in which the applicant's parent company holds more than 10% of the equity or debt liability.
- d. Any corporation of which the Applicant is a subsidiary.
- e. Any Officer, Director, Partner, or Joint Venturer of the applicant, and any business concern owned or controlled by any such individual.

Provide a response in each section. Each item pertains to all of the entities and individuals listed above. If an answer is None or the item is not applicable, write "None" or "N/A". A question left unanswered will not be presumed "Not applicable" or "None" - THE FORM WILL BE DEEMED INCOMPLETE.

As used below, the term "law or regulation pertaining to protection of the environment" includes laws and regulations relating to the discharge, treatment, storage, processing, recycling or disposal of industrial waste or hazardous waste and any others relating to water and air pollution, discharge of hazardous substances and treatment of hazardous materials. It includes regulations of the Passaic Valley Sewerage Commissioners ("PVSC"), N.J. DEP, the U.S. EPA, the N.J. DOT, and the U.S. Department of Transportation.

Protection (DEP) or United States Environmental Protection Agnecessary.	gency. Attach additional shee	ets if
Name of	Date	
entity cited: Empire Overall Dry Cleaners, Inc.	Issued: Misc.	٠,
7,100	.,,,,,,	
Address of		
alleged violation: 18 Stefanic Are Elmwood	Park NJ 07407	_
All I are Mine Displace of Mark to	Type of	
Alleged violation: Misc. Discharge Violation	notice:	
Disposition & explanation: Either notice or per	alita accement	
Disposition & explanation. 2147cl 11041ce of per-	asement	_
- 1		
Name of issuing agency: $P.V.S.C.$	Docket No.:	
Prosecution, Administrative Orders and Actions, civil complaint past 10 years by the U.S. Environmental Protection Agency or U alleged violation of any federal law or regulation pertaining to propies of this section as necessary.	s, or similar notices issued to you. S. Department of Transportation	u within the n for any
$\langle \alpha \langle \alpha \rangle$		1 ·
Name of (VV/H)	Date	
entity cited:	Issued:	
Address of	•	
alleged violation:		_
	Type of	
Alleged violation:	notice:	
Thiogod Violation.	notice	-
Disposition &		
explanation:		_
		_
NTomo o Cinquin a como o ci	Doublest and	
Name of issuing agency:	Docket no.:	-

NEW JERSEY VIOLATIONS NOTICES. List and explain all Summonses, Notices of Violation,

Notices of Prosecution, Administrative Orders and Actions, civil complaints, settlements, Judicial or Administrative Consent Orders, or Notices of Intent to Deny or Revoke any license or permit, or similar notices, issued to you within the past 10 years by the PVSC, New Jersey Department of Environmental

C. NEW JERSEY MUNICIPALITIES AND COUNTIES Notices of Prosecution, Administrative Orders and Actions, Sumkind, and Notices of intent to Deny or Revoke a license or permit the past 10 years by any municipality or county in the State of Not law or regulation pertaining to the protection of the environment, offense. Use additional copies of this section as necessary.	monses, civil Complaints, Citations of any , or any similar notices issued to you within ew Jersey, for any alleged violation of any
Name of entity cited:	Date Issued:
Address of alleged violation:	
Alleged violation:	Type of notice:
Disposition & explanation:	
Name of issuing agency:	Docket no.:
D. OTHER STATES AND FOREIGN COUNTRIES. List Notices of Prosecution, Administrative Orders and Actions, Sumkind, and Notices of Intent to Deny or Revoke a license or permit the past 10 years by any state other than the State of New Jersey violation of any law or regulation pertaining to the protection of or littering offense. Use additional copies of this section as need to be a section a	mons, Civil Complaints, Citations of any t, or any similar notices issued to you within or by any foreign country, for any alleged the environment, other than a motor vehicle
Name of entity cited:	Date Issued:
Address of alleged violation:	
Alleged violation:	Type of notice:
Disposition & explanation:	
Name of issuing agency:	Docket no.:

SECTION SEVEN

OTHER CIVIL COURT JUDGMENTS AND PENDING LITIGATION

(To be completed by all applicants)

A. OTHER JUDGMENTS . List and explain all judgagainst the applicant in the past 10 years, starting with the ras necessary.		
Title of case:	Docket No.:	
Name & location of court:	Date judgment entered:	
Nature of suit:	Amt./terms of judgment:	
B. PENDING SUITS. List and explain all civil suit party plaintiff or defendant. Include matters involving resolupies of this section as necessary.	s in which the applicant is presently invution before arbitration boards. Use ado	
Title of case: (N/A)	Docket No.:	
Name & location of court:	Date Filed:	
Nature of suit:	Status:	

SECTION EIGHT

CRIMINAL CHARGES AND CONVICTIONS

(To be completed by all applicants)

List all indictments, accusations, summonses, complaints, and information against the applicant for any crime, felony, misdemeanor, disorderly persons offense, petty disorderly persons offense or criminal violation.

NOTE: You need not list convictions for any violation of Title 39 of the Revised Statutes (N.J.S.A.) or comparable motor vehicle offenses in jurisdictions other than New Jersey. Death by Auto or Vehicular Homicide is considered a criminal offense and must be listed under this item.

List convictions first. Use additional copies of this page as necessary.

charged/convicted: Empire Overall	Dry Cleaners
Description of crime/offense charged: Alledged disch	varge Violation
Date Charged: Sept 22, 2005	Jurisdiction Where Charged: Bergen County
Indictment information, Complaint No., indictment No. etc., 05-06	0-1726-A
Disposition (if applicable, sentence imposed): Payment o	f penality.

CERTIFICATION

(All applicants must sign and date the following certification)

I hereby certify the answers supplied in the foregoing SUPPLEMENTAL SEWER USE PERMIT APPLICATION QUESTIONNAIRE are true. I am aware that if any of the foregoing responses are willfully false, I am subject to punishment.

2/10/06 Dated:

Vice President
Print Title & Position



CERTIFICATIONS

NJ DEP 07010 / NY DOH 11634 / CT PH-0233 US ARMY CORPS (USACE)

ANALYTICAL RESULTS SUMMARY

Client

Empire Overall

18 Stefanic Ave

APL Order ID Number

26010100

Date Sampled

01/05/2006 6:00

Contact

Elmwood Park, NJ 07407

Date Received

01/05/2006 9:40

18 Stefanic Ave

Project

Matrix

Wastewater

Site

Report Date 01/19/2006 11:45

Customer Service Rep.

Samula Number						
Sample Number/ Parameter	Method	Analysis Time	Analyst	Result	Units	MDL
26010100-001 Discharge				· · · · · · · · · · · · · · · · · · ·		
Biochemical Oxygen Demand	SM 5210B	01/06/2006 12:00	RSWAMY	132	mg/L	4
Cadmium	EPA 200.7	01/11/2006 18:06	MARK	<0.002	mg/L	0.002
Copper	EPA 200.7	01/11/2006 18:06	MARK	0.04	mg/L	0.01
Lead	EPA 200.7	01/11/2006 18:06	MARK	0.03 🐥	mg/L	0.01
Mercury	EPA 245.1	01/05/2006 15:00	ASTOICA	<0.0005	mg/L	0.0005
Nickel	EPA 200.7	01/11/2006 18:06	MARK	0.038★	mg/L	0.005
Total Petroleum Hydrocarbons	EPA 1664A	01/18/2006 17:00	AUGUST	8.4	mg/L	1.4
Total Suspended Solids (TSS)	SM 2540D	01/09/2006 17:00	PBHANDARI	18.9	mg/L	3
Zinc	EPA 200.7	01/11/2006 18:06	MARK	0.29	mg/L	0.03

SA: See attached report

Brian Wood Laboratory Director

The state of the s

1275 BLOOMFIELD AVENUE, BLDG. 6, FAIRFIELD, NJ 07004 TEL 973 227 0422 FAX 973 227 2813



CERTIFICATIONS

NJ DEP 07010 / NY DOH 11634 / CT PH-0233 US ARMY CORPS (USACE)

ANALYTICAL RESULTS SUMMARY

Client

Empire Overall

18 Stefanic Ave

Elmwood Park, NJ 07407

Contact

Project

Report Date 01/19/2006 11:45

APL Order ID Number

Date Sampled

Date Received Matrix

Site

26010100

01/05/2006 6:00 01/05/2006 9:40

Wastewater

18 Stefanic Ave

Customer Service Rep.

Sample Number/ Parameter	Method	Analysis Time	Amalyan	D4	1124-	
i didilietei	Metriod	Analysis Time	Analyst	Result	Units	MDL
26010100-001 Discharge						
Biochemical Oxygen Demand	SM 5210B	01/06/2006 12:00	RSWAMY	132	mg/L	4
Cadmium	EPA 200.7	01/11/2006 18:06	MARK	<0.002	mg/L	0.002
Copper	EPA 200.7	01/11/2006 18:06	MARK	0.04	mg/L	0.01
Lead	EPA 200.7	01/11/2006 18:06	MARK	0.03 🐥	mg/L	0.01
Mercury	EPA 245.1	01/05/2006 15:00	ASTOICA	<0.0005	mg/L	0.0005
Nickel	EPA 200.7	01/11/2006 18:06	MARK	0.038≭	mg/L	0.005
Total Petroleum Hydrocarbons	EPA 1664A	01/18/2006 17:00	AUGUST	8.4	mg/L	1.4
Total Suspended Solids (TSS)	SM 2540D	01/09/2006 17:00	PBHANDARI	18.9	mg/L	3.
Zinc	EPA 200.7	01/11/2006 18:06	MARK	0.29	mg/L	0.03

SA: See attached report

Brian Wood

Laboratory Director

1275 BLOOMFIELD AVENUE, BLDG. 6, FAIRFIELD, NJ 07004 TEL 973 227 0422 FAX 973 227 2813



CERTIFICATIONS

AQUA PRO-TECH LABORATORIES

NJ DEP 07010 / NY DOH 11634 / CT PH-0233 US ARMY CORPS (USACE)

ANALYTICAL RESULTS SUMMARY

Client

Contact

Project

Empire Overall

18 Stefanic Ave

26011167

Elmwood Park, NJ 07407

Date Sampled

01/31/2006 6:30

Date Received

01/31/2006 9:38

Matrix

Wastewater

Site

18 Stefanic Ave

Report Date 02/22/2006 7:51

Customer Service Rep.

APL Order ID Number

Sample Number/ Parameter	Method	Analysis Time	Analyst	Result	Units	MDL
26011167-001 Discharge	1 4000					
Ammonia, as Nitrogen	EPA 350.2	01/31/2006 13:00	YKIZNER	<0.2	mg/L	0.2
Chemical Oxygen Demand	SM 5220D	02/06/2006 11:00	ASTOICA	199	mg/L	5
Mercury	EPA 245.1	02/02/2006 11:30	ASTOICA	< 0.0005	mg/L	0.0005
Oil & Grease	EPA 1664A	02/08/2006 17:00	AUGUST	16.7	mg/L	1.4
Phenois	EPA420.1/SM5530 D	02/09/2006 10:00	YKIZNER	0.06	mg/L	0.05
Total Organic Carbon	EPA 415.1	02/06/2006 17:15	RSWAMY	36	mg/L	0.5
Total Solids	SM 2540B	02/07/2006 10:15	MARK	850	mg/L	3
Total Volatile Solids	EPA 160.4	02/08/2006 10:30	MARK	160	mg/L	3
VSS	EPA 160.2,160.4	02/07/2006 14:00	RSWAMY	11	mg/L	3

SA: See attached report

Laboratory Director

1275 BLOOMFIELD AVENUE, BLDG. 6, FAIRFIELD, NJ 07004 TEL 973 227 0422 FAX 973 227 2813

APL	CUSTOMER: EMPIRE OFEHLL	= Olegan	SEND REPORT TO:	CHAIN OF	CUSTODY
AQUA PRO-TECH LABORATORIES	ADDRESS: STEFFAMILE	WIR AVE	ADDRESS:	TURNARO	TURNAROUND TIME
Certified Environmental Testing	Elmusoo BAKK	3		APL STANDARD in 2 weeks RUSH turnaround available	APL STANDARD in 2 weeks RUSH turnaround available upon request and tab
1275 BLOOMFIELD AVENUE • BUILDING 6 FAIRFIELD, NEW JERSEY 07004	PHONE: 01 796	9011	PHONE:	approval	
TEL: 973 227 0422	FAX: (201) 796.	0955	FAX:	REPURI CALTS ONLY	REPURI FURMAI
FAX: 973.227.2813 www.smenenctechlabs.com	PROJECT NAME:		SEND INVOICE TO:	NJ DEP REDUCED DELIVERABLES	IVERABLES ABLES
CONTAMINATION EVE	PROJECT MGR:		ADDRESS:	ELECTRONIC DATA DELIVERY	LIVERY
HIGH MEDIUM LOW	P.O. NUMBER		SAMPLED BY:	SHP#	
	MATRIX ABBREVIATIONS: D) - DRINKING WATER	G-GROUNDWATER W-WASTEWATER	WATER S-SOIL SL-SLUDGE	P-POOL L-LAKE
APL LAB ID#	SAMPLE SOURCE: FIELD ID	DATE TIME	SAMPLE TYPE M NO. OF PRESERVATIVE R DOTTLES PRESERVATIVE	ANALYSIS REQUESTED	UESTED
260/1167-001) SCHAKER	1.31 06 0630		TS TVS, VSS	
		0590 90.18.1	X	COD, TOC, NH3	
	Ж	1-31.06 0630	X	0,1 + GREASE	
	11	1.31.06 0630	×	MEROURY	
	V	1.31.06 0630		Phenols	
BELINOUISHED BY (Print) F. ZAHW		DATE/:3/: 06	RECEIVED BY (Print)	1016	DATE /: 31.00
Signature/Agent of: 2 Lahr		: 38 AM PM	Signature/Agent of:		Time 938 AM PM
RELINQUISHED BY (Print)			RECEIVED BY (Print)		DATE : :
Signature/Agent of:		Time : AM PM	Signature/Agent of:		Time : AM PM
RELINQUISHED BY (Print)		ATE : :	RECEIVED BY (Print)		
Signature/Agent of:		Time : AM PM	Signature/Agent of:		Time AM PM
COMMENTS/SPECIAL INSTRUCTIONS				0%	
			Cooler Temp. upon receipt at lab		
CERTIFICATIONS: NELAP (National Environmental Laboratory Accredation Program) NJDEP #07010 NYDOH #11634 CTPH #0233 US ARMY By circuitat this Chain of District American American American American American With analysis and reporting for your sample	aboratory Accredation Program) NJI	DEP #07010 NYDOH #	11634 CTPH #0233 US ARMY	or vour samole	
BY SIGNING THIS CHAIN OF CUSTOUY AUTENTIENT, CUSTOFFER	explessly agrees to pay AFL for an one	aliyes, reasonaniy mouno	י שיייי ישליי שווש טוסלושווש מומוח ווווא יושוחים ווו ח	טו אסמו ממווייאיי	

